

## **A Comparative Study on Personality and Self-Concept among Normal Adolescents and Orthopaedically Handicapped Adolescents**

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### **Abstract**

**Background:** There is a growing awareness and interest for handicapped individuals in the society. Both government and non-government organisations provide help for disabled. But there is less evidence related to a study on personality and self-concept among normal and orthopaedically handicapped adolescents. Positive self-concept is required for orthopaedically handicapped adolescents to develop good personality.

**Purpose:** The purpose of the study was to compare the personality and self-concept among normal and orthopaedically handicapped adolescents. To develop a positive self-concept for the group having a low self-concept by implementing a self-improvement program.

**Methods:** A total of 120 students with 60 normal adolescence and 60 orthopaedically handicapped adolescence groups, were selected in a convenient sampling method from two main institutions – Indian Red Cross Society and Jeevan Jothi School, Egmore. The personality trait was assessed through Eysenck's Personality Questionnaire (EPQ-R) and self-concept by self-concept Inventory.

**Results:** There was significant difference in orthopaedically handicapped adolescence group in their extraversion trait were the 'F' ratio was 0.05. Also,

more negative self-concept was found in orthopaedically handicapped adolescence group with 't' value showed a significant of 4.99 respectively.

**Conclusion:** Environment, social support and sense of security play a major role in developing good personality and self-concept among orthopaedically handicapped adolescents.

**Keywords:** Adolescence, orthopaedically handicapped, Eysenck's Personality Questionnaire, personality and self-concept

## INTRODUCTION

Adolescence is a transitional stage of physical and psychological human development that generally occurs during the period from puberty to legal adulthood (age of majority)<sup>1, 2</sup>. Adolescence is believed to be a highly emotional, volatile, egocentric person lacking an awareness of things not of direct personal concern. It is believed to be impatience, when thwarted in effective testing conservative unstable perfectionistic and sensitive. Adolescence is a cross cultural phenomenon possessing distinctive characteristics of drive intensity affect and moods and variations in behaviour. On the whole, adolescents tend to be an age exclusive group abounding self-reference.

Stanley Hall (1844-1924) described "Adolescence as a period of storm and stress"<sup>4</sup>. The storm-and-stress view is Hall's concept that adolescence is a turbulent time charged with conflict and mood swings. Hall proposed that adolescence can be interpreted in two ways as sociological and psychological interpretations determined genetically by physiological factors. In sociological interpretation, were a child moves from dependency to independency in his behaviour (transitional period between childhood and adulthood). In Psychological interpretation, were a psychologist view adolescent as an young person in transition between the behaviour typical of children and the behaviour typical adults between a period in which individual learns to make adjustment to the needs of self others and community<sup>5</sup>.

Various theories of adolescence have been formulated by Stanley hall. ERIKSON'S (1959) theory of psychosocial development which emphasises the search for identity during the adolescent year's psychosocial development encompasses how people understand of themselves.

In a study, by the National Institute of Mental Health entitled adolescence and stress (more) traced the need of many skills to adolescence for problem solving and coping skills. Collin Turnbull stated that "adolescence is like empty but organic receptacles fully formed though still growing waiting to be filled and like receptacles we are capable at that stage of life of receiving with all our being becoming one with what in within us.

## Personality

KURT LEWIN, cognitive field theories was a developed theory called "Field Theory"<sup>7</sup>. He stated that behaviour depends on two factors- personal and environmental.

### **Self-Concept**

CARL ROGERS (1959) suggests that “man is an organised whole rather than an individuals phenomenal field is that preceptors which consists of the perceptions of I and Me” the self. Carl Jung called Self “the centre” – point of balance between conscious and unconscious<sup>6</sup>.

ALLPORT (1961) has described the self concept as, “The self is something of which we are immediately aware, we think of it as the warm, central private region of our life<sup>8</sup>. ‘As such it plays a crucial part in our consciousness’ (a concept broader than self) in our personality (a concept broader than consciousness) and in our organism (a concept broader than personality ) thus it is some kind of core in our being”.

MC CANDLESS & COOP (1970) defined self-concept as “The sum of perceptions individuals hold about themselves as individuals and the ways they relate to others and to the environment”<sup>10, 11</sup>. He has given 3 components of self-concept which are as follows.

- It refers to rigidity and flexibility of the self-concept.
- It includes Self-evaluation, Locus of control, self enhancement, obtaining social acceptance achieving personal competence.
- It refers to the idea of self-esteem. Do we have high or low self-regard for ourselves? Do we accept or reject ourselves?

In this study, we compare the self-concept and personality of the normal and orthopaedically handicapped adolescents, which eventually gives an idea, as to what could be done for orthopaedically handicapped adolescents. The other most important factor is that, based on the result one can develop a positive self-concept for the group having low self-concept by designing a self-improving program, Behaviour modification techniques, counselling etc.

## **MATERIALS & METHODOLOGY**

A total of 120 students ranging from 13 to 20 years of age (60 orthopaedically handicapped adolescents & 60 normal adolescents) in which 30 males & 30 females in both groups were selected in a convenient sampling method from two main institutions – Indian Red cross society and Jeevan Jothi school, Egmore. The complete study was done on three different days with in a span of one week. Inclusion criteria were 13-20 years of age group, normal adolescents and orthopaedically handicapped adolescents only. Exclusion criteria were age group <13 or > 20 years, adults, mentally challenged students etc. Ethical clearance was obtained.

## **PROCEDURE**

After meeting the inclusion criteria, students were seated comfortably in spacious and well created classroom. The session formally began with the distribution of question booklet and an answer sheet to each of the student. Each questions booklet comprised of two Questionnaires – Eysenck’s Personality Questionnaire (EPQ-R)<sup>9</sup> and Self-Concept Inventory and a personal data sheet.

Each student was asked to fill up the detail of the personal data sheet including name, sex, school and class, age and income. General instructions were read out by the researcher as follows. This questionnaire consists of certain questions which help us to learn about what boys and girls of your age feel about themselves. The test (Eysenck's) consists of 48 items each with two response categories "Yes or No", the test measures psychoticism, neuroticism and extraversion.

## STATISTICAL ANALYSIS

The data were descriptively analyzed by factorial analysis of variance (ANOVA)<sup>13-15</sup> to study the significance difference between normal and orthopaedically handicapped adolescents for personality traits. Paired 't' test with mean value was used to study significance difference between normal and orthopaedically handicapped adolescents on positive and negative self concepts. The statistical significance difference was determined with p value at 0.05.

## RESULTS

Table (1), (2) and (3) showed that the 'F' ratio for normal adolescents variable is not significant at 0.05 levels, and the 'F' ratio for interactive effect is also not significant. The 'F' ratio for orthopaedically handicapped adolescents is 0.05 levels. This difference might be the result of their fear of rejection which results in withdrawal from social group.

**Table (1)** Factorial analysis of variance for Extraversion trait between normal adolescents and orthopaedically handicapped adolescents

Source of variation	Df	Sum of squares	Variance estimate	F ratio	P
Normal adolescents	2	1.01	0.51	0.04	NS
Orthopaedically handicapped adolescents	2	384.92	192.46	33.79	0.05
Interaction effect	4	0.53	0.13		
Within group variance	114	129.79	11.39	0.01	NS

**Table (2)** Factorial analysis of variance for Neuroticism trait between normal adolescents and orthopaedically handicapped adolescents

Source of variation	df	Sum of squares	Variance estimate	F ratio	P
Normal adolescents	2	54.67	27.34	1.08	NS
Orthopaedically handicapped adolescents	2	662.66	331.33	13.08	0.05
Interaction effect	1	67.86	67.86		
Within group variance	114	2877.89	25.24	2.69	NS

**Table (3)** Factorial analysis of variance for Psychoticism trait between normal adolescents and orthopaedically handicapped adolescents

Source of variation	df	Sum of squares	Variance estimate	F ratio	P
Normal adolescents	1	2.14	2.14	2.04	NS
Orthopaedically handicapped adolescents	1	164.63	164.63	156.79	0.05
Interaction effect	1	1.03	1.03		
Within group variance	116	121.23	1.05	0.96	NS

**Table (4)** 't' test Positive Self-concept for normal adolescents and orthopaedically handicapped adolescents

S.NO	N	Variable	Mean	S.D.	't' value	Level of Significance
1.	60	Normal	84.32			
2.	60	Orthopaedically handicapped adolescents	68.80	14.95	5.69	Significant

From the table (4), it was very clear that the positive self concept for normal adolescents group with a mean of 84.32 and the 't' value of 5.69 which was significant when compared to the orthopaedically handicapped adolescents group mean of 68.80 respectively. This showed that the orthopaedically handicapped adolescents have been affected due to irrespective of gender.

**Table (5)** 't' test Negative Self-concept for normal adolescents and orthopaedically handicapped adolescents

S.NO	N	Variable	Mean	S.D.	't' value	Level of Significance
1.	60	Normal	69.06			
2.	60	Orthopaedically handicapped adolescents	84.84	17.01	4.99	Significant

From the table (5), it was very clear that the negative self concept for normal adolescents group with a mean of 69.06 when compared to the orthopaedically handicapped adolescents group mean of 84.84 and the 't' value of 4.99 which is significant. This showed that the orthopaedically handicapped adolescents have been affected with irrespective of gender in their negative self-concept.

## DISCUSSION

There is a great awareness in the study about physical disabilities, its cause and difficulties. Many programmes are conducted both by the government and private institutions to improve the community and create awareness. In this study, a personality dimension<sup>17</sup> (extraversion, neuroticism and psychoticism) between normal adolescents and orthopaedically handicapped adolescents reveals that there is no significant difference among normal adolescents in extraversion tendency and there is no significant difference in the interactive effect of both normal adolescents and orthopaedically handicapped adolescents. But the results show a significant difference among orthopaedically handicapped adolescents in extraversion tendency. In psychoticism and neuroticism also, the orthopaedically handicapped adolescents show a significant difference from the normal adolescents and interactive effect shows no difference. This evidently shows that the orthopaedic condition has contributed to their formation of personality.

Adolescents are well aware of the role, their personality plan in social relationship are strongly motivated to improve the personalities. People with disabilities tend to receive less social support than do people who have no disabilities. SILLER (1976) found that social interaction between able bodied and disabled individuals seemed to be marked by subtle signs of avoidance by the individuals, who are able bodied.

This will be the concrete reason for the difference in the personality dimensions among orthopaedically handicapped adolescents might be the result of their environment and social groups. The personality patterns in the orthopaedically handicapped adolescents are the product of their experience with the environment.

In the self-concept both orthopaedically handicapped adolescents showed a significant difference in positive self-concept and negative self-concept, irrespective of gender. HARRY STACK SULLIVAN stated that all human behaviour depend upon two factors- satisfaction of drives and sense of security<sup>16</sup>. Thus, sense of insecurity developed in the mind of orthopaedically handicapped adolescents would have resulted in the difference.

## **CONCLUSION**

Environment, social support and sense of security play a major role in developing good personality and self-concept among orthopaedically handicapped adolescents. The results obtained from this study can be used to implicate the personality of the orthopaedically handicapped individuals by counselling and behaviour modification procedures. That is their self-confidence, social interaction and socialization nature can be developed through modification.

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